

THE SAFE ANAESTHESIA LIAISON GROUP (SALG)

TERMS OF REFERENCE

1. Purpose

- 1.1. To review anaesthesia specific incidents reported to NHS England and other UK national healthcare safety bodies.
- 1.2. To provide representatives to other patient safety expert groups as appropriate
- 1.3. To support the expansion of Speciality Specific Incident Reporting across the NHS.
- 1.4. To maintain a mechanism of prioritising and taking appropriate action for anaesthesia incidents through the core expert group.
- 1.5. To provide a central reference point for calls and enquiries from healthcare professionals, the media and patients through the SALG Administrator.
- 1.6. To maintain confidentiality at all times, no individual incidents will be discussed by patient or hospital identifiers, and all incidents will remain anonymous, and referred to by the incident ID number.
- 1.7. Where serious causes for concern are raised (including incidents that indicate less than good practice) the Chairman will deal with each case appropriately.
- 1.8. Where appropriate, to work closely with national safety bodies in other disciplines including those outside of healthcare e.g. the Health and Safety Executive.
- 1.9. To provide periodic reports for wider dissemination and to assist in establishing action, training and education needs.
- 1.10. To evaluate anaesthesia safety reports for further investigation, research or audit.
- 1.11. To convene working parties in order that specific safety issues can be addressed in detail

2. Constitution

- 2.1. The Group shall be steered by a core membership, supplemented by Advisory Members as required and as appropriate to the subject matter.
- 2.2. Each specific action arising at SALG meetings will be owned by either the RCoA or the AAGBI who will take responsibility for seeing it through to a conclusion. The ownership for each action will be recorded in the minutes.
- 2.3. The Core Group shall consist of the following individuals people:
 - Two representatives from the RCoA
 - The RCoA Clinical Quality Advisor
 - The Chairman of the Faculty of Intensive Care Medicine Professional Standards Committee
 - One representative from the RCoA Lay Committee
 - Two representatives from the national safety organisations
 - Two representatives from the AAGBI
 - One trainee representative
 - One NHS risk manager
- 2.4. Advisory Members will be invited as required and may be organisation representatives or individual advisers as agreed by the Group.
- 2.5. Members will normally serve on the Group for two years; reviewed annually.

3. Quorum

- 3.1. The quorum of the Group shall be five core members.

4. Meetings

- 4.1. The Group will meet routinely four times a year; more frequently when required.

5. Finance

- 5.1. Funding for SALG will be met by the RCoA.
- 5.2. Supplementary project and research funding will be sourced as required.

6. Review of terms of reference

- 6.1 The Group shall review its terms of reference every year.